

For more information: Diana Greene Foster, PhD—fosterd@obgyn.ucsf.edu; (510) 986-8940

Interest in the pericoital pill

This is a summary of preliminary data from 982 women in family planning clinics across the country (California, Colorado, Michigan, New Jersey, Tennessee and Florida) collected between January and May 2011. Using tablet computer guided interviews in clinic waiting rooms, we asked women:

If a birth control pill was available that you **ONLY** had to take **WHEN** you had sex, **WOULD YOU BE INTERESTED?**

Here is some information about it:

- You would take the pill within a few hours before or after you had sex.
- It probably would cause spotting or irregular periods.
- It would be more effective than condoms at preventing pregnancy.
- It might be less effective than taking regular birth control pills every single day.
- It would not protect against sexually transmitted infection.

- Definitely yes Probably yes
 Probably no Definitely no

Data collection and next steps

These data from family planning clinic patients represent women who do have access to contraceptive methods. Data collection from abortion clinic patients, who tend to have poorer access to reproductive health services and lower use of effective methods, will be complete by August 1, 2011. Together with the family planning clinic data, data from abortion patients will give us a full picture of the potential of a pericoital pill to reduce unintended pregnancy and improve use of effective contraceptive methods.

Major findings

Among clinic patients not seeking pregnancy, 22% say “definitely yes;” another 29% say “probably yes.”

Among those who have frequent unprotected sex (three episodes or more over the past three months), more than 60% are interested (29% “definitely,” 33% “probably”).

The greatest interest is among women who report difficulty getting or refilling prescriptions for birth control methods. Two thirds say they would be interested in a pericoital pill (31% “definitely,” 35% “probably”).

Reasons for being interested in the pericoital pill:

67%—I would not have to remember to take a regular birth control pill every day.

56%—I like the idea of taking hormones only when I need them.

29%—I don’t have sex often so I don’t want to use a method all the time.

11%—I don’t have a regular partner so I don’t want to use a method all the time

Take-home message

There is a large demand for a pericoital pill. **This pill will particularly appeal to the women who need it most—those who have frequent unprotected sex.**

But it needs to be made available without a prescription. Many of the women who have trouble accessing effective prescription birth control will not be able to access this pill if it is made available only by prescription.

Dr. Diana Greene Foster, the principal investigator for this study, is Director of Research at ANSIRH and Associate Professor, UCSF Department of Obstetrics, Gynecology and Reproductive Sciences